

Fill in this information to identify your case:

United States Bankruptcy Court for the:

**Western District of Oklahoma**

Case number (If known): \_\_\_\_\_ Chapter you are filing under:

Chapter 7  
 Chapter 11  
 Chapter 12  
 Chapter 13

Check if this is an amended filing

**Official Form 101****Voluntary Petition for Individuals Filing for Bankruptcy**

12/22

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, “Do you own a car,” the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Identify Yourself****About Debtor 1:****1. Your full name**

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

Bring your picture identification to your meeting with the trustee.

**Jennifer**

First name

**Kristen**

Middle name

**Willhite**

Last name

Suffix (Sr., Jr, II, III)

**About Debtor 2 (Spouse Only in a Joint Case):**

First name

Middle name

Last name

Suffix (Sr., Jr, II, III)

**2. All other names you have used in the last 8 years**

Include your married or maiden names and any assumed, trade names and *doing business as* names.

Do NOT list the name of any separate legal entity such as a corporation, partnership, or LLC that is not filing this petition.

**Jennifer**

First name

Middle name

**Thrall**

Last name

Business name (if applicable)

Business name (if applicable)

First name

Middle name

Last name

Business name (if applicable)

Business name (if applicable)

**3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)**xxx - xx - 3 0 4 1

OR

9xx - xx - \_\_\_\_\_

xxx - xx - \_\_\_\_\_

OR

9xx - xx - \_\_\_\_\_

Debtor 1

<u>Jennifer</u>	<u>Kristen</u>	<u>Willhite</u>
First Name	Middle Name	Last Name

Case number (if known) \_\_\_\_\_

**About Debtor 1:****4. Your Employer Identification Number (EIN), if any.**

\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_-

EIN

\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_-

EIN

**About Debtor 2 (Spouse Only in a Joint Case):**

\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_-

EIN

\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_-

EIN

**5. Where you live****318 N D St**

Number Street

\_\_\_\_\_  
\_\_\_\_\_**Duncan, OK 73533-6628**

City State ZIP Code

**Stephens**

County

If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.

Number Street

P.O. Box

City State ZIP Code

**If Debtor 2 lives at a different address:**

Number Street

\_\_\_\_\_  
\_\_\_\_\_

City State ZIP Code

County

If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address.

Number Street

P.O. Box

City State ZIP Code

**6. Why you are choosing *this district* to file for bankruptcy****Check one:**

Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

I have another reason. Explain.  
(See 28 U.S.C. § 1408)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_**Check one:**

Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

I have another reason. Explain.  
(See 28 U.S.C. § 1408)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Debtor 1

First Name	Jennifer	Kristen	Willhite
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Case number (if known) \_\_\_\_\_

## Part 2: Tell the Court About Your Bankruptcy Case

<b>7. The chapter of the Bankruptcy Code you are choosing to file under</b>	<i>Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.</i> <input checked="" type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13
<b>8. How you will pay the fee</b> <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> <b>I will pay the entire fee when I file my petition.</b> Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.</li> <li><input type="checkbox"/> <b>I need to pay the fee in installments.</b> If you choose this option, sign and attach the <i>Application for Individuals to Pay The Filing Fee in Installments</i> (Official Form 103A).</li> <li><input type="checkbox"/> <b>I request that my fee be waived</b> (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the <i>Application to Have the Chapter 7 Filing Fee Waived</i> (Official Form 103B) and file it with your petition.</li> </ul>	
<b>9. Have you filed for bankruptcy within the last 8 years?</b> <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> No.</li> <li><input type="checkbox"/> Yes. District _____ When _____ Case number _____ MM / DD / YYYY</li> <li>District _____ When _____ Case number _____ MM / DD / YYYY</li> <li>District _____ When _____ Case number _____ MM / DD / YYYY</li> </ul>	
<b>10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?</b> <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> No.</li> <li><input type="checkbox"/> Yes. Debtor _____ Relationship to you _____ District _____ When _____ Case number, if known _____ MM / DD / YYYY</li> <li>Debtor _____ Relationship to you _____ District _____ When _____ Case number, if known _____ MM / DD / YYYY</li> </ul>	
<b>11. Do you rent your residence?</b> <ul style="list-style-type: none"> <li><input type="checkbox"/> No. Go to line 12.</li> <li><input checked="" type="checkbox"/> Yes. Has your landlord obtained an eviction judgment against you?           <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> No. Go to line 12.</li> <li><input type="checkbox"/> Yes. Fill out <i>Initial Statement About an Eviction Judgment Against You</i> (Form 101A) and file it as part of this bankruptcy petition.</li> </ul> </li> </ul>	

Debtor 1

Jennifer  
First NameKristen  
Middle NameWillhite  
Last Name

Case number (if known) \_\_\_\_\_

## Part 3: Report About Any Businesses You Own as a Sole Proprietor

**12. Are you a sole proprietor of any full- or part-time business?**

No. Go to Part 4.  
 Yes. Name and location of business

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

Name of business, if any

Number Street

City

State

ZIP Code

Check the appropriate box to describe your business:

Health Care Business (as defined in 11 U.S.C. § 101(27A))  
 Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))  
 Stockbroker (as defined in 11 U.S.C. § 101(53A))  
 Commodity Broker (as defined in 11 U.S.C. § 101(6))  
 None of the above

**13. Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor or a debtor as defined by 11 U.S.C. § 1182(1)?**

For a definition of *small business debtor*, see 11 U.S.C. § 101(51D).

*If you are filing under Chapter 11, the court must know whether you are a small business debtor or a debtor choosing to proceed under Subchapter V so that it can set appropriate deadlines.* If you indicate that you are a small business debtor or you are choosing to proceed under Subchapter V, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).

No. I am not filing under Chapter 11.  
 No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.  
 Yes. I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I do not choose to proceed under Subchapter V of Chapter 11.  
 Yes. I am filing under Chapter 11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I choose to proceed under Subchapter V of Chapter 11.

Debtor 1

**Jennifer**  
First Name

Krister

**Kristen**  
Middle Name

Willhite

Case number (*if known*)

Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

*For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?*

No.

Yes. What is the hazard?

If immediate attention is needed, why is it needed?

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Where is the property?

Number Street

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City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Debtor 1

Jennifer  
First NameKristen  
Middle NameWillhite  
Last Name

Case number (if known) \_\_\_\_\_

## Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

## 15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

## About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file.

You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

**Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

**Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

**Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

## About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file.

You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

**Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

**Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

**Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1

<u>Jennifer</u>	<u>Kristen</u>	<u>Willhite</u>
First Name	Middle Name	Last Name

Case number (if known) \_\_\_\_\_

## Part 6: Answer These Questions for Reporting Purposes

16. <b>What kind of debts do you have?</b>	16a. <b>Are your debts primarily consumer debts?</b> <i>Consumer debts</i> are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."
	<input type="checkbox"/> No. Go to line 16b. <input checked="" type="checkbox"/> Yes. Go to line 17.
16b. <b>Are your debts primarily business debts?</b> <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.	<input type="checkbox"/> No. Go to line 16c. <input type="checkbox"/> Yes. Go to line 17.
16c. State the type of debts you owe that are not consumer debts or business debts.	_____
17. <b>Are you filing under Chapter 7?</b>	<input type="checkbox"/> No. I am not filing under Chapter 7. Go to line 18. <input checked="" type="checkbox"/> Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
18. <b>How many creditors do you estimate that you owe?</b>	<input checked="" type="checkbox"/> 1-49 <input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,000-100,000 <input type="checkbox"/> More than 100,000 <input type="checkbox"/> 50-99 <input type="checkbox"/> 5,001-10,000 <input type="checkbox"/> 100-199 <input type="checkbox"/> 10,001-25,000 <input type="checkbox"/> 200-999
19. <b>How much do you estimate your assets to be worth?</b>	<input checked="" type="checkbox"/> \$0-\$50,000 <input type="checkbox"/> \$1,000,001-\$10 million <input type="checkbox"/> \$500,000,001-\$1 billion <input type="checkbox"/> \$50,001-\$100,000 <input type="checkbox"/> \$10,000,001-\$50 million <input type="checkbox"/> \$1,000,000,001-\$10 billion <input type="checkbox"/> \$100,001-\$500,000 <input type="checkbox"/> \$50,000,001-\$100 million <input type="checkbox"/> \$10,000,000,001-\$50 billion <input type="checkbox"/> \$500,001-\$1 million <input type="checkbox"/> \$100,000,001-\$500 million <input type="checkbox"/> More than \$50 billion
20. <b>How much do you estimate your liabilities to be?</b>	<input type="checkbox"/> \$0-\$50,000 <input type="checkbox"/> \$1,000,001-\$10 million <input type="checkbox"/> \$500,000,001-\$1 billion <input type="checkbox"/> \$50,001-\$100,000 <input type="checkbox"/> \$10,000,001-\$50 million <input type="checkbox"/> \$1,000,000,001-\$10 billion <input checked="" type="checkbox"/> \$100,001-\$500,000 <input type="checkbox"/> \$50,000,001-\$100 million <input type="checkbox"/> \$10,000,000,001-\$50 billion <input type="checkbox"/> \$500,001-\$1 million <input type="checkbox"/> \$100,000,001-\$500 million <input type="checkbox"/> More than \$50 billion

## Part 7: Sign Below

For you

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Jennifer Kristen Willhite

Jennifer Kristen Willhite, Debtor 1

Executed on 04/27/2023  
MM/ DD/ YYYY

Debtor 1

<u>Jennifer</u>	<u>Kristen</u>	<u>Willhite</u>
First Name	Middle Name	Last Name

Case number (if known) \_\_\_\_\_

**For your attorney, if you are represented by one**

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Luke Homen

Signature of Attorney for Debtor

Date 04/27/2023

MM / DD / YYYY

Luke Homen

Printed name

Luke Homen Law, PLLC

Firm name

10313 Greenbriar Pkwy

Number Street

Oklahoma City

City

OKState 73159 ZIP CodeContact phone (405) 639-2099Email address luke@lukehomenlaw.com32243

Bar number

OK

State

Fill in this information to identify your case and this filing:

Debtor 1	<b>Jennifer</b>	<b>Kristen</b>	<b>Willhite</b>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>Western</b>		District of <b>Oklahoma</b>	
Case number <b>_____</b>			

Check if this is an amended filing

## Official Form 106A/B

### Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

##### 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

No. Go to Part 2.

Yes. Where is the property?

1.1

Street address, if available, or other description _____		
City	State	ZIP Code _____
County _____		

##### What is the property? Check all that apply.

- Single-family home
- Duplex or multi-unit building
- Condominium or cooperative
- Manufactured or mobile home
- Land
- Investment property
- Timeshare
- Other \_\_\_\_\_

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

Current value of the portion you own?

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Check if this is community property (see instructions)

##### Who has an interest in the property? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: \_\_\_\_\_

##### 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here ..... →

\$0.00

#### Part 2: Describe Your Vehicles

**Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.**

##### 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

- No
- Yes

Debtor Willhite, Jennifer Kristen

Case number (if known) \_\_\_\_\_

3.1 Make: <u>Buick</u>	<b>Who has an interest in the property?</b> Check one.	Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D: Creditors Who Have Claims Secured by Property</i> .	
Model: <u>LeSabre</u>	<input type="checkbox"/> Debtor 1 only		
Year: <u>1999</u>	<input type="checkbox"/> Debtor 2 only		
Approximate mileage: _____	<input type="checkbox"/> Debtor 1 and Debtor 2 only		
Other information:	<input checked="" type="checkbox"/> At least one of the debtors and another		
<input type="checkbox"/> <b>Check if this is community property</b> (see instructions)		<b>Current value of the entire property?</b>	<b>Current value of the portion you own?</b>
		<u>\$1,500.00</u>	<u>\$1,500.00</u>

## 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

No  
 Yes

4.1 Make: _____	<b>Who has an interest in the property?</b> Check one.	Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D: Creditors Who Have Claims Secured by Property</i> .	
Model: _____	<input type="checkbox"/> Debtor 1 only		
Year: _____	<input type="checkbox"/> Debtor 2 only		
Other information:	<input type="checkbox"/> Debtor 1 and Debtor 2 only		
	<input type="checkbox"/> At least one of the debtors and another		
<input type="checkbox"/> <b>Check if this is community property</b> (see instructions)		<b>Current value of the entire property?</b>	<b>Current value of the portion you own?</b>

## 5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here ..... →

\$1,500.00

## Part 3: Describe Your Personal and Household Items

## Do you own or have any legal or equitable interest in any of the following items?

**Current value of the portion you own?**  
 Do not deduct secured claims or exemptions.

## 6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

No  
 Yes. Describe. ....

Household goods and furnishings

\$1,000.00

## 7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

No  
 Yes. Describe. ....

Household electronics

\$500.00

Debtor Willhite, Jennifer Kristen

Case number (if known) \_\_\_\_\_

**8. Collectibles of value**

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

 No Yes. Describe. ....
**9. Equipment for sports and hobbies**

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

 No Yes. Describe. ....
**10. Firearms**

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

 No Yes. Describe. ....
**11. Clothes**

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

 No Yes. Describe. ....

\$250.00

**12. Jewelry**

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

 No Yes. Describe. ....

\$1,000.00

**13. Non-farm animals**

Examples: Dogs, cats, birds, horses

 No Yes. Describe. ....

\$0.00

**14. Any other personal and household items you did not already list, including any health aids you did not list** No Yes. Give specific information. ....
**15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here** →

\$2,750.00

**Part 4: Describe Your Financial Assets**

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?

Do not deduct secured claims or exemptions.

Debtor Willhite, Jennifer Kristen

Case number (if known) \_\_\_\_\_

**16. Cash***Examples:* Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition No Yes .....

Cash: .....

**17. Deposits of money***Examples:* Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. No Yes .....

Institution name:

17.1. Checking account:	<u>BancFirst CK 5575</u>	<u>\$123.98</u>
17.2. Checking account:	<u>Chime CK 2107</u>	<u>(\$63.21)</u>
17.3. Other financial account:	<u>Paypal</u>	<u>\$0.00</u>

**18. Bonds, mutual funds, or publicly traded stocks***Examples:* Bond funds, investment accounts with brokerage firms, money market accounts No Yes ..... Institution or issuer name:

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**19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture** No Yes. Give specific information about them.....

Name of entity:

% of ownership:

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**20. Government and corporate bonds and other negotiable and non-negotiable instruments***Negotiable instruments* include personal checks, cashiers' checks, promissory notes, and money orders.*Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them. No Yes. Give specific information about them.....

Issuer name:

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Debtor Willhite, Jennifer Kristen

Case number (if known) \_\_\_\_\_

**21. Retirement or pension accounts***Examples:* Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No Yes. List each account separately. Type of account: \_\_\_\_\_ Institution name: \_\_\_\_\_401(k) or similar plan: PPLSI \_\_\_\_\_ \$893.49**22. Security deposits and prepayments**

Your share of all unused deposits you have made so that you may continue service or use from a company

*Examples:* Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Yes ..... Institution name or individual: \_\_\_\_\_

Electric: \_\_\_\_\_

Gas: \_\_\_\_\_

Heating oil: \_\_\_\_\_

Security deposit on rental unit: \_\_\_\_\_

Prepaid rent: \_\_\_\_\_

Telephone: \_\_\_\_\_

Water: \_\_\_\_\_

Rented furniture: \_\_\_\_\_

Other: \_\_\_\_\_

**23. Annuities** (A contract for a periodic payment of money to you, either for life or for a number of years) No Yes ..... Issuer name and description: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

 No Yes ..... Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit** No Yes. Give specific information about them. ...   \_\_\_\_\_

Debtor Willhite, Jennifer Kristen

Case number (if known) \_\_\_\_\_

26. **Patents, copyrights, trademarks, trade secrets, and other intellectual property***Examples:* Internet domain names, websites, proceeds from royalties and licensing agreements No Yes. Give specific information about them. ....

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27. **Licenses, franchises, and other general intangibles***Examples:* Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No Yes. Give specific information about them. ....

--	--

**Money or property owed to you?****Current value of the portion you own?**

Do not deduct secured claims or exemptions.

28. **Tax refunds owed to you** No Yes. Give specific information about them, including whether you already filed the returns and the tax years. ....

--	--

Federal: \_\_\_\_\_

State: \_\_\_\_\_

Local: \_\_\_\_\_

29. **Family support***Examples:* Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No Yes. Give specific information. ....

--	--

Alimony: \_\_\_\_\_

Maintenance: \_\_\_\_\_

Support: \_\_\_\_\_

Divorce settlement: \_\_\_\_\_

Property settlement: \_\_\_\_\_

30. **Other amounts someone owes you***Examples:* Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No Yes. Give specific information. ....

--	--

Debtor Willhite, Jennifer Kristen

Case number (if known) \_\_\_\_\_

**31. Interests in insurance policies**

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

 No Yes. Name the insurance company  
of each policy and list its value. ....

Company name:

Beneficiary:

Surrender or refund value:

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**32. Any interest in property that is due you from someone who has died**

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

 No Yes. Give specific information. ....
**33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment**

Examples: Accidents, employment disputes, insurance claims, or rights to sue

 No Yes. Describe each claim. ....
**34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims** No Yes. Describe each claim. ....
**35. Any financial assets you did not already list** No Yes. Give specific information. ....
**36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached  
for Part 4. Write that number here** ..... →

\$954.26

**Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.****37. Do you own or have any legal or equitable interest in any business-related property?** No. Go to Part 6. Yes. Go to line 38.
**Current value of the  
portion you own?**  
 Do not deduct secured  
claims or exemptions.
**38. Accounts receivable or commissions you already earned** No Yes. Describe. ....

Debtor Willhite, Jennifer Kristen

Case number (if known) \_\_\_\_\_

39. **Office equipment, furnishings, and supplies**

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

 No Yes. Describe. ....

--	--

40. **Machinery, fixtures, equipment, supplies you use in business, and tools of your trade** No Yes. Describe. ....

--	--

41. **Inventory** No Yes. Describe. ....

--	--

42. **Interests in partnerships or joint ventures** No Yes. Describe. ....

Name of entity:

% of ownership:

_____	_____	_____
_____	_____	_____
_____	_____	_____

43. **Customer lists, mailing lists, or other compilations** No Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? No Yes. Describe. ....

--	--

44. **Any business-related property you did not already list** No Yes. Give specific information .....

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

45. **Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here** .....

\$0.00

Debtor Willhite, Jennifer Kristen

Case number (if known) \_\_\_\_\_

**Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.  
If you own or have an interest in farmland, list it in Part 1.**

**46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?**

No. Go to Part 7.  
 Yes. Go to line 47.

**Current value of the portion you own?**  
Do not deduct secured claims or exemptions.

**47. Farm animals**

*Examples:* Livestock, poultry, farm-raised fish

No  
 Yes .....

--	--

**48. Crops—either growing or harvested**

No  
 Yes. Give specific information. .....

--	--

**49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade**

No  
 Yes .....

--	--

**50. Farm and fishing supplies, chemicals, and feed**

No  
 Yes .....

--	--

**51. Any farm- and commercial fishing-related property you did not already list**

No  
 Yes. Give specific information. .....

--	--

**52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here** →

**\$0.00**

**Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above**

**53. Do you have other property of any kind you did not already list?**

*Examples:* Season tickets, country club membership

No  
 Yes. Give specific information. .....


**54. Add the dollar value of all of your entries from Part 7. Write that number here** →

**\$0.00**

Debtor Willhite, Jennifer Kristen

Case number (if known) \_\_\_\_\_

## Part 8: List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2 .....	→	\$0.00
56. Part 2: Total vehicles, line 5		\$1,500.00
57. Part 3: Total personal and household items, line 15		\$2,750.00
58. Part 4: Total financial assets, line 36		\$954.26
59. Part 5: Total business-related property, line 45		\$0.00
60. Part 6: Total farm- and fishing-related property, line 52		\$0.00
61. Part 7: Total other property not listed, line 54	+	\$0.00
62. Total personal property. Add lines 56 through 61. ....	\$5,204.26	Copy personal property total → + \$5,204.26
63. Total of all property on Schedule A/B. Add line 55 + line 62. ....		\$5,204.26

Fill in this information to identify your case:

Debtor 1	<u>Jennifer</u>	<u>Kristen</u>	<u>Willhite</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u> </u>	<u> </u>	<u> </u>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Western District of Oklahoma</u>		
Case number (if known)	<u> </u>		

Check if this is an amended filing

## Official Form 106C

### Schedule C: The Property You Claim as Exempt

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

#### Part 1: Identify the Property You Claim as Exempt

Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

1.  You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption.	
Brief description: 1999 Buick LeSabre	\$1,500.00	<input checked="" type="checkbox"/> \$1,500.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Okl. Stat. tit. 31 § 1(A)(13)
Line from Schedule A/B: 3.1			
Brief description: Household goods and furnishings	\$1,000.00	<input checked="" type="checkbox"/> \$1,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Okl. Stat. tit. 31 § 1(A)(3)
Line from Schedule A/B: 6			

3. Are you claiming a homestead exemption of more than \$189,050?

(Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.)

No

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

No

Yes

Debtor 1 Jennifer Kristen Willhite Case number (if known) \_\_\_\_\_

First Name Middle Name Last Name

## Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
Brief description: <u>Household electronics</u>	<u>\$500.00</u>	<input checked="" type="checkbox"/> \$500.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>Okl. Stat. tit. 31 § 1(A)(3)</u> _____ _____
Line from Schedule A/B: <u>7</u>			
Brief description: <u>Clothes</u>	<u>\$250.00</u>	<input checked="" type="checkbox"/> \$250.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>Okl. Stat. tit. 31 § 1(A)(7)</u> _____ _____
Line from Schedule A/B: <u>11</u>			
Brief description: <u>Wedding rings</u>	<u>\$1,000.00</u>	<input checked="" type="checkbox"/> \$1,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>Okl. Stat. tit. 31 § 1(A)(8)</u> _____ _____
Line from Schedule A/B: <u>12</u>			
Brief description: <u>PPLSI</u>	<u>\$893.49</u>	<input checked="" type="checkbox"/> \$893.49 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>Okl. Stat. tit. 60 § 327 &amp; 328</u> _____ _____
Line from Schedule A/B: <u>21</u>			

Fill in this information to identify your case:

Debtor 1	<u>Jennifer</u>	<u>Kristen</u>	<u>Willhite</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u></u>	<u></u>	<u></u>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Western District of Oklahoma</u>		
Case number (if known)	<u></u>		

Check if this is an amended filing

## Official Form 106D

### Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

#### 1. Do any creditors have claims secured by your property?

No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.

Yes. Fill in all of the information below.

#### Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A	Column B	Column C
Amount of claim	Value of collateral that supports this claim	Unsecured portion if any

2.1	<u></u>	Describe the property that secures the claim: <u></u>	<u></u>	<u></u>	<u></u>
	Creditor's Name <u></u>				
	Number Street <u></u>				
	City State ZIP Code <u></u>				
<p><b>Who owes the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim relates to a community debt</p>					
<p><b>Date debt was incurred</b> <u></u></p>					
<p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>					
<p><b>Nature of lien.</b> Check all that apply.</p> <p><input type="checkbox"/> An agreement you made (such as mortgage or secured car loan)</p> <p><input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)</p> <p><input type="checkbox"/> Judgment lien from a lawsuit</p> <p><input type="checkbox"/> Other (including a right to offset)</p>					
<p><b>Last 4 digits of account number</b> <u>      </u></p>					
<p>Add the dollar value of your entries in Column A on this page. Write that number here: <u><input type="text" value="\$0.00"/></u></p>					

Debtor 1

<u>Jennifer</u>	<u>Kristen</u>	<u>Willhite</u>
First Name	Middle Name	Last Name

Case number (if known) \_\_\_\_\_

Part 1:

Additional Page

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.

Column A	Column B	Column C
<b>Amount of claim</b> Do not deduct the value of collateral.	<b>Value of collateral that supports this claim</b>	<b>Unsecured portion If any</b>

2.2

Creditor's Name

Number Street

City State ZIP Code

**Who owes the debt?** Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim relates to a community debt**

**Date debt was incurred****Describe the property that secures the claim:****As of the date you file, the claim is:** Check all that apply.

Contingent  
 Unliquidated  
 Disputed

**Nature of lien.** Check all that apply.

An agreement you made (such as mortgage or secured car loan)  
 Statutory lien (such as tax lien, mechanic's lien)  
 Judgment lien from a lawsuit  
 Other (including a right to offset)

**Last 4 digits of account number** \_\_\_\_\_**Add the dollar value of your entries in Column A on this page. Write that number here:**

\$0.00

**If this is the last page of your form, add the dollar value totals from all pages. Write that number here:**

\$0.00

Fill in this information to identify your case:

Debtor 1	<b>Jennifer</b>	<b>Kristen</b>	<b>Willhite</b>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<b>Western District of Oklahoma</b>		
Case number (if known)			

Check if this is an amended filing

## Official Form 106E/F

### Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Hold Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

No. Go to Part 2.  
 Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

	Total claim	Priority amount	Nonpriority amount
Priority Creditor's Name	Last 4 digits of account number _____		
Number Street	When was the debt incurred? _____		
City State ZIP Code	As of the date you file, the claim is: Check all that apply.		
<b>Who incurred the debt? Check one.</b>	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
<b>Check if this claim is for a community debt</b>	<b>Type of PRIORITY unsecured claim:</b> <input type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or person injury while you were intoxicated <input type="checkbox"/> Other. Specify _____		
<b>Is the claim subject to offset?</b>	<input type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor 1

**Jennifer**  
First Name

**Kristen**  
Middle Name

**Willhite**  
Last Name

Case number (if known) \_\_\_\_\_

## Part 2: List All of Your NONPRIORITY Unsecured Claims

## 3. Do any creditors have nonpriority unsecured claims against you?

No. You have nothing to report in this part. Submit this form to the court with your other schedules.

Yes.

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

4.1 Ars Account Resolution

Nonpriority Creditor's Name

**Po Box 459079**

Number Street

**Fort Lauderdale, FL 33345-9079**

City State ZIP Code

## Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Check if this claim is for a community debt

## Is the claim subject to offset?

No

Yes

Last 4 digits of account number \_\_\_\_\_

**Total claim****\$813.00**When was the debt incurred? 07/20/2022

As of the date you file, the claim is: Check all that apply.

Contingent

Unliquidated

Disputed

## Type of NONPRIORITY unsecured claim:

Student loans

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

Other. Specify  
**Collection**

4.2 Axcssfn/cngo

Nonpriority Creditor's Name

**7755 Montgomery Rd**

Number Street

**Cincinnati, OH 45236-4291**

City State ZIP Code

## Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Check if this claim is for a community debt

## Is the claim subject to offset?

No

Yes

Last 4 digits of account number \_\_\_\_\_

**\$1,500.00**When was the debt incurred? 01/31/2023

As of the date you file, the claim is: Check all that apply.

Contingent

Unliquidated

Disputed

## Type of NONPRIORITY unsecured claim:

Student loans

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

Other. Specify

4.3 Capital One

Nonpriority Creditor's Name

**PO Box 30285**

Number Street

**Salt Lake City, UT 84130**

City State ZIP Code

## Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Check if this claim is for a community debt

## Is the claim subject to offset?

No

Yes

Last 4 digits of account number \_\_\_\_\_

**\$4,684.00**When was the debt incurred? 01/11/2016

As of the date you file, the claim is: Check all that apply.

Contingent

Unliquidated

Disputed

## Type of NONPRIORITY unsecured claim:

Student loans

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

Other. Specify

Debtor 1

Jennifer  
First NameKristen  
Middle NameWillhite  
Last Name

Case number (if known) \_\_\_\_\_

## Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Total claim

4.4	<b>CBSA Collection</b> Nonpriority Creditor's Name <b>Po Box 1929</b> Number Street <b>Stillwater, OK 74076-1929</b> City State ZIP Code	Last 4 digits of account number _____ When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____	\$41.00
4.5	<b>Check 'n Go</b> Nonpriority Creditor's Name <b>2360 N Highway 81</b> Number Street <b>Duncan, OK 73533-1219</b> City State ZIP Code	Last 4 digits of account number _____ When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____	\$1,500.00
4.6	<b>CHIME</b> Nonpriority Creditor's Name <b>CHIME</b> <b>Po Box 417</b> Number Street <b>San Francisco, CA 94104-0417</b> City State ZIP Code	Last 4 digits of account number _____ When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____	\$63.21

Debtor 1

Jennifer  
First NameKristen  
Middle NameWillhite  
Last Name

Case number (if known) \_\_\_\_\_

## Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Total claim

4.7	<b>Courtesy Loans</b> Nonpriority Creditor's Name <b>810 W Main St</b> Number Street <b>Duncan, OK 73533-4616</b> City State ZIP Code	Last 4 digits of account number _____ When was the debt incurred? _____ <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____	\$750.00
4.8	<b>Dept of Ed/aidvantage</b> Nonpriority Creditor's Name <b>PO Box 4450</b> Number Street <b>Portland, OR 97208-4450</b> City State ZIP Code	Last 4 digits of account number _____ When was the debt incurred? <b>08/27/2007</b> <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____	\$74,518.00
4.9	<b>Duncan Anesthesia Associates</b> Nonpriority Creditor's Name <b>1310 W Oak Ave</b> Number Street <b>Duncan, OK 73533</b> City State ZIP Code	Last 4 digits of account number _____ When was the debt incurred? _____ <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____	\$858.00

Debtor 1

<b>Jennifer</b>	<b>Kristen</b>	<b>Willhite</b>
First Name	Middle Name	Last Name

Case number (if known) \_\_\_\_\_

## Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Total claim

4.10	<b>Duncan Regional Hospital</b> Nonpriority Creditor's Name <b>PO Box 1264</b> Number Street <b>Duncan, OK 73534</b> City State ZIP Code			Last 4 digits of account number _____	\$15,500.00
<b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b>			<b>When was the debt incurred?</b> _____ <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			<b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____		
4.11	<b>HRRG</b> Nonpriority Creditor's Name <b>PO Box 8486</b> Number Street <b>Coral Springs, FL 33075</b> City State ZIP Code			Last 4 digits of account number _____	\$261.10
<b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b>			<b>When was the debt incurred?</b> _____ <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			<b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____		
4.12	<b>I.C. System, Inc</b> Nonpriority Creditor's Name <b>Po Box 64378</b> Number Street <b>Saint Paul, MN 55164</b> City State ZIP Code			Last 4 digits of account number _____	\$300.00
<b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b>			<b>When was the debt incurred?</b> <u>05/07/2022</u> <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			<b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Collection</b>		

Debtor 1

**Jennifer** **Kristen** **Willhite**  
 First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

## Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Total claim

4.13	<p><b>Jefferson Capital Syst</b>            Nonpriority Creditor's Name  <b>16 Mcleland Rd</b>            Number Street  <b>Saint Cloud, MN 56303</b>            City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number _____</p> <p>When was the debt incurred? <u>02/17/2022</u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify  <b>Collection</b></p>	<b>\$3,461.00</b>
4.14	<p><b>Loyalloans</b>            Nonpriority Creditor's Name  <b>810 W Main St</b>            Number Street  <b>Duncan, OK 73533-4616</b>            City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number _____</p> <p>When was the debt incurred? <u>01/01/2023</u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify  <b>Unsecured</b></p>	<b>\$868.00</b>
4.15	<p><b>Merrick Bank Corp</b>            Nonpriority Creditor's Name  <b>PO Box 9201</b>            Number Street  <b>Old Bethpage, NY 11804-9001</b>            City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number _____</p> <p>When was the debt incurred? <u>02/11/2018</u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify</p>	<b>\$1,812.00</b>

Debtor 1

Jennifer  
First NameKristen  
Middle NameWillhite  
Last Name

Case number (if known) \_\_\_\_\_

## Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.			Total claim
4.16	<p><b>Navient</b>            Nonpriority Creditor's Name  <b>PO Box 9500</b>            Number Street  <b>Wilkes Barre, PA 18773</b>            City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input checked="" type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number _____</p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input checked="" type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input type="checkbox"/> Other. Specify _____</p>	\$33,000.00
4.17	<p><b>U S Dept of Ed</b>            Nonpriority Creditor's Name  <b>Po Box 5609</b>            Number Street  <b>Greenville, TX 75403-5609</b>            City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number _____</p> <p>When was the debt incurred? <u>08/30/2006</u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input checked="" type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input type="checkbox"/> Other. Specify _____</p>	\$2,379.00
4.18	<p><b>Vermillion Plumbing</b>            Nonpriority Creditor's Name  <b>306 W Main St</b>            Number Street  <b>Duncan, OK 73533-7028</b>            City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input checked="" type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number _____</p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify _____</p>	\$1,700.00

Debtor 1

<u>Jennifer</u>	<u>Kristen</u>	<u>Willhite</u>
First Name	Middle Name	Last Name

Case number (if known) \_\_\_\_\_

## Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Total claim

4.19	<b>Wakefield &amp; Associates</b> Nonpriority Creditor's Name	Last 4 digits of account number _____	<b>\$2,010.00</b>
	<b>PO Box 58</b> Number Street	When was the debt incurred? <u>08/18/2020</u>	
	<b>Fort Morgan, CO 80701</b> City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
		Type of NONPRIORITY unsecured claim:	
		<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Collection</b>	
	<b>Who incurred the debt? Check one.</b>	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another	
	<b>Is the claim subject to offset?</b>	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor 1

Jennifer  
First NameKristen  
Middle NameWillhite  
Last Name

Case number (if known) \_\_\_\_\_

## Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Jefferson Capital Systems LLC

Name

16 McLeland Rd, St Cloud

Number Street

Saint Cloud, MN 56303

City

State ZIP Code

## On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.3 of (Check one):  Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

Love Beal & Nixon

Name

Po Box 32738

Number Street

Oklahoma City, OK 73123

City

State ZIP Code

## On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.3 of (Check one):  Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

Rausch Sturm LLP

Name

250 N Sunnyslope Rd Ste 300

Number Street

Brookfield, WI 53005

City

State ZIP Code

## On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.3 of (Check one):  Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

Name

Number Street

City

State ZIP Code

## On which entry in Part 1 or Part 2 did you list the original creditor?

Line \_\_\_\_\_ of (Check one):  Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

Debtor 1

<u>Jennifer</u>	<u>Kristen</u>	<u>Willhite</u>
First Name	Middle Name	Last Name

Case number (if known) \_\_\_\_\_

## Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

		Total claim
<b>Total claims from Part 1</b>	6a. Domestic support obligations	6a. _____ <b>\$0.00</b>
	6b. Taxes and certain other debts you owe the government	6b. _____ <b>\$0.00</b>
	6c. Claims for death or personal injury while you were intoxicated	6c. _____ <b>\$0.00</b>
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. + _____ <b>\$0.00</b>
	6e. Total. Add lines 6a through 6d.	6e. _____ <b>\$0.00</b>
<b>Total claims from Part 2</b>	6f. Student loans	6f. _____ <b>\$109,897.00</b>
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. _____ <b>\$0.00</b>
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. _____ <b>\$0.00</b>
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. + _____ <b>\$36,121.31</b>
	6j. Total. Add lines 6f through 6i.	6j. _____ <b>\$146,018.31</b>

Fill in this information to identify your case:

Debtor 1	<u>Jennifer</u>	<u>Kristen</u>	<u>Willhite</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u></u>	<u></u>	<u></u>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Western District of Oklahoma</u>		
Case number (if known)	<u></u>		

Check if this is an amended filing

## Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

**1. Do you have any executory contracts or unexpired leases?**

No. Check this box and file this form with your other schedules. You have nothing else to report on this form.

Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).

**2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.**

	Person or company with whom you have the contract or lease			State what the contract or lease is for
2.1	Name Number Street City State ZIP Code			
2.2	Name Number Street City State ZIP Code			
2.3	Name Number Street City State ZIP Code			
2.4	Name Number Street City State ZIP Code			

Fill in this information to identify your case:

Debtor 1	<u>Jennifer</u>	<u>Kristen</u>	<u>Willhite</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u>                  </u>	<u>                  </u>	<u>                  </u>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Western District of Oklahoma</u>		
Case number (if known)	<u>                  </u>		

Check if this is an amended filing

## Official Form 106H

### Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

No  
 Yes

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

No. Go to line 3.

Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

No

Yes. In which community state or territory did you live? \_\_\_\_\_ Fill in the name and current address of that person.

Name \_\_\_\_\_

Number Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

#### Column 1: Your codebtor

#### Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.1

Willhite, Brent

Name  
318 N D St  
Number Street  
Duncan, OK 73533-6628

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Schedule D, line \_\_\_\_\_

4.4, 4.5, 4.6,  
4.7, 4.9, 4.10,

Schedule E/F, line 4.16, 4.18

Schedule G, line \_\_\_\_\_

Fill in this information to identify your case:

Debtor 1	<b>Jennifer</b>	<b>Kristen</b>	<b>Willhite</b>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<b>Western District of Oklahoma</b>		
Case number (if known)			

Check if this is:

An amended filing  
 A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

**Official Form 106I****Schedule I: Your Income**

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Employment****1. Fill in your employment information.**

If you have more than one job, attach a separate page with information about additional employers.

Include part time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

	<b>Debtor 1</b>	<b>Debtor 2 or non-filing spouse</b>
<b>Employment status</b>	<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not Employed	<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not Employed
<b>Occupation</b>	Call center	Inventory
<b>Employer's name</b>	Pre-Paid Legal Services	Love's Travel Stops & Country Store
<b>Employer's address</b>	1 Prepaid Way Number Street	10601 N Pennsylvania Ave Number Street
	Ada, OK 74820-5813 City State Zip Code	Oklahoma City, OK 73120-4108 City State Zip Code
<b>How long employed there?</b>		

**Part 2: Give Details About Monthly Income**

**Estimate monthly income as of the date you file this form.** If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	<b>For Debtor 1</b>	<b>For Debtor 2 or non-filing spouse</b>
<b>2. List monthly gross wages, salary, and commissions</b> (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be.	2. <u>\$2,766.45</u>	<u>\$2,789.87</u>
<b>3. Estimate and list monthly overtime pay.</b>	3. + <u>\$0.00</u>	<u>\$0.00</u>
<b>4. Calculate gross income.</b> Add line 2 + line 3.	4. <u>\$2,766.45</u>	<u>\$2,789.87</u>

Debtor 1

<u>Jennifer</u>	<u>Kristen</u>	<u>Willhite</u>
First Name	Middle Name	Last Name

Case number (if known) \_\_\_\_\_

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here..... →	4. <u>\$2,766.45</u>	\$2,789.87
5. List all payroll deductions:		
5a. Tax, Medicare, and Social Security deductions	5a. <u>\$311.11</u>	\$588.14
5b. Mandatory contributions for retirement plans	5b. <u>\$0.00</u>	\$0.00
5c. Voluntary contributions for retirement plans	5c. <u>\$69.39</u>	\$0.00
5d. Required repayments of retirement fund loans	5d. <u>\$0.00</u>	\$0.00
5e. Insurance	5e. <u>\$164.66</u>	\$0.00
5f. Domestic support obligations	5f. <u>\$0.00</u>	\$0.00
5g. Union dues	5g. <u>\$0.00</u>	\$0.00
5h. Other deductions. Specify: _____	5h. + <u>\$0.00</u>	+ <u>\$0.00</u>
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6. <u>\$545.15</u>	\$588.14
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. <u>\$2,221.30</u>	\$2,201.73
8. List all other income regularly received:		
8a. Net income from rental property and from operating a business, profession, or farm	8a. <u>\$0.00</u>	\$0.00
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.		
8b. Interest and dividends	8b. <u>\$0.00</u>	\$0.00
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c. <u>\$0.00</u>	\$0.00
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.		
8d. Unemployment compensation	8d. <u>\$0.00</u>	\$0.00
8e. Social Security	8e. <u>\$0.00</u>	\$0.00
8f. Other government assistance that you regularly receive	8f. <u>\$0.00</u>	\$0.00
Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.		
Specify: _____		
8g. Pension or retirement income	8g. <u>\$0.00</u>	\$0.00
8h. Other monthly income. Specify: _____	8h. + <u>\$0.00</u>	+ <u>\$0.00</u>
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9. <u>\$0.00</u>	\$0.00
10. Calculate monthly income. Add line 7 + line 9.	10. <u>\$2,221.30</u>	+ <u>\$2,201.73</u> = <u>\$4,423.03</u>
11. State all other regular contributions to the expenses that you list in Schedule J.		
Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.		
Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.		
Specify: _____	11. + <u>\$0.00</u>	
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Your Assets and Liabilities and Certain Statistical Information</i> , if it applies		12. <u>\$4,423.03</u>
13. Do you expect an increase or decrease within the year after you file this form?		
<input checked="" type="checkbox"/> No.		
<input type="checkbox"/> Yes. Explain: _____		
Combined monthly income		

Fill in this information to identify your case:

Debtor 1	<u>Jennifer</u>	<u>Kristen</u>	<u>Willhite</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u>                  </u>	<u>                  </u>	<u>                  </u>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Western District of Oklahoma</u>		
Case number (if known)	<u>                                  </u>		

Check if this is:

An amended filing  
 A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY**Official Form 106J****Schedule J: Your Expenses**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Your Household****1. Is this a joint case?** No. Go to line 2. Yes. **Does Debtor 2 live in a separate household?** No Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household of Debtor 2*.**2. Do you have dependents?** No Yes. Fill out this information for each dependent.....**Dependent's relationship to Debtor 1 or Debtor 2****Dependent's age****Does dependent live with you?**Child 5 No.  Yes.                                                              No.  Yes.                                                              No.  Yes.                                                              No.  Yes.                                                              No.  Yes.**3. Do your expenses include expenses of people other than yourself and your dependents?** No Yes**Part 2: Estimate Your Ongoing Monthly Expenses**

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

**4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.**4.                                    \$400.00**If not included in line 4:**

4a. Real estate taxes

4a.                                    \$0.00

4b. Property, homeowner's, or renter's insurance

4b.                                    \$0.00

4c. Home maintenance, repair, and upkeep expenses

4c.                                    \$100.00

4d. Homeowner's association or condominium dues

4d.                                    \$0.00

Debtor 1

Jennifer  
First NameKristen  
Middle NameWillhite  
Last Name

Case number (if known) \_\_\_\_\_

			<b>Your expenses</b>
5.	<b>Additional mortgage payments for your residence</b> , such as home equity loans	5.	\$0.00
6.	<b>Utilities:</b>		
6a.	Electricity, heat, natural gas	6a.	\$300.00
6b.	Water, sewer, garbage collection	6b.	\$100.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$300.00
6d.	Other. Specify: _____	6d.	\$0.00
7.	<b>Food and housekeeping supplies</b>	7.	\$1,350.00
8.	<b>Childcare and children's education costs</b>	8.	\$250.00
9.	<b>Clothing, laundry, and dry cleaning</b>	9.	\$200.00
10.	<b>Personal care products and services</b>	10.	\$100.00
11.	<b>Medical and dental expenses</b>	11.	\$100.00
12.	<b>Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$300.00
13.	<b>Entertainment, clubs, recreation, newspapers, magazines, and books</b>	13.	\$100.00
14.	<b>Charitable contributions and religious donations</b>	14.	\$0.00
15.	<b>Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a.	Life insurance	15a.	\$0.00
15b.	Health insurance	15b.	\$0.00
15c.	Vehicle insurance	15c.	\$60.00
15d.	Other insurance. Specify: _____	15d.	\$0.00
16.	<b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16.	\$0.00
17.	<b>Installment or lease payments:</b>		
17a.	Car payments for Vehicle 1	17a.	\$0.00
17b.	Car payments for Vehicle 2	17b.	\$0.00
17c.	Other. Specify: _____	17c.	\$150.00
17d.	Other. Specify: _____	17d.	\$175.00
18.	<b>Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).</b>	18.	\$0.00
19.	<b>Other payments you make to support others who do not live with you.</b> Specify: _____	19.	\$0.00
20.	<b>Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.</b>		
20a.	Mortgages on other property	20a.	\$0.00
20b.	Real estate taxes	20b.	\$0.00
20c.	Property, homeowner's, or renter's insurance	20c.	\$0.00
20d.	Maintenance, repair, and upkeep expenses	20d.	\$0.00
20e.	Homeowner's association or condominium dues	20e.	\$0.00

Debtor 1

<u>Jennifer</u>	<u>Kristen</u>	<u>Willhite</u>
First Name	Middle Name	Last Name

Case number (if known) \_\_\_\_\_

21. Other. Specify: _____	21. + _____ \$0.00
22. Calculate your monthly expenses.	
22a. Add lines 4 through 21.	22a. _____ \$3,985.00
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	22b. _____ \$0.00
22c. Add line 22a and 22b. The result is your monthly expenses.	22c. _____ \$3,985.00
23. Calculate your monthly net income.	
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. _____ \$4,423.03
23b. Copy your monthly expenses from line 22c above.	23b. - _____ \$3,985.00
23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c. _____ \$438.03
24. Do you expect an increase or decrease in your expenses within the year after you file this form?	
For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?	
<input checked="" type="checkbox"/> No.	None
<input type="checkbox"/> Yes.	

Fill in this information to identify your case:

Debtor 1	<b>Jennifer</b> First Name	<b>Kristen</b> Middle Name	<b>Willhite</b> Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>Western District of Oklahoma</b>			
Case number (if known)			

Check if this is an amended filing

## Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

#### Part 1: Summarize Your Assets

##### Your assets

Value of what you own

##### 1. Schedule A/B: Property (Official Form 106A/B)

1a. Copy line 55, Total real estate, from <i>Schedule A/B</i> .....	\$0.00
1b. Copy line 62, Total personal property, from <i>Schedule A/B</i> .....	\$5,204.26
1c. Copy line 63, Total of all property on <i>Schedule A/B</i> .....	\$5,204.26

#### Part 2: Summarize Your Liabilities

##### Your liabilities

Amount you owe

##### 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)

2a. Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i> .....	\$0.00
---	--------

##### 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)

3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i> .....	\$0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i> .....	+ \$146,018.31

##### Your total liabilities

\$146,018.31

#### Part 3: Summarize Your Income and Expenses

##### 4. Schedule I: Your Income (Official Form 106I)

Copy your combined monthly income from line 12 of <i>Schedule I</i> .....	\$4,423.03
---	------------

##### 5. Schedule J: Your Expenses (Official Form 106J)

Copy your monthly expenses from line 22c of <i>Schedule J</i> .....	\$3,985.00
---	------------

Debtor 1

Jennifer  
First NameKristen  
Middle NameWillhite  
Last Name

Case number (if known) \_\_\_\_\_

## Part 4: Answer These Questions for Administrative and Statistical Records

## 6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Yes

## 7. What kind of debt do you have?

**Your debts are primarily consumer debts.** Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

**Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the **Statement of Your Current Monthly Income**: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$5,556.31

## 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

## Total claim

## From Part 4 on Schedule E/F, copy the following:

9a. Domestic support obligations (Copy line 6a.) \$0.009b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.009c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$0.009d. Student loans. (Copy line 6f.) \$109,897.009e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) \$0.009f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) + \$0.009g. **Total.** Add lines 9a through 9f. \$109,897.00

Fill in this information to identify your case:

Debtor 1	<u>Jennifer</u>	<u>Kristen</u>	<u>Willhite</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u> </u>	<u> </u>	<u> </u>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Western District of Oklahoma</u>		
Case number (if known)	<u> </u>		

Check if this is an amended filing

## Official Form 106Dec

### Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

#### Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person \_\_\_\_\_ Attach *Bankruptcy Petitioner Preparer's Notice, Declaration, and Signature (Official Form 119)*.

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

 /s/ Jennifer Kristen Willhite  
Jennifer Kristen Willhite, Debtor 1

Date 04/27/2023  
MM/ DD/ YYYY

Fill in this information to identify your case:

Debtor 1	<b>Jennifer</b> First Name	<b>Kristen</b> Middle Name	<b>Willhite</b> Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>Western District of Oklahoma</b>			
Case number (if known)			

Check if this is an amended filing

## Official Form 107

### Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Give Details About Your Marital Status and Where You Lived Before

##### 1. What is your current marital status?

Married

Not married

##### 2. During the last 3 years, have you lived anywhere other than where you live now?

No

Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1:	Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2 lived there
1845 N Parkview Ave Number Street	From <u>2018</u> To <u>2021</u>	<input type="checkbox"/> Same as Debtor 1	<input type="checkbox"/> Same as Debtor 1 From _____ To _____
Duncan, OK 73533 City State ZIP Code	Number Street City	State ZIP Code	
Number Street From _____ To _____	Number Street From _____ To _____	Number Street From _____ To _____	
City State ZIP Code	City State ZIP Code	City State ZIP Code	

##### 3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

No

Yes. Make sure you fill out *Schedule H: Your Codebtors* (Official Form 106H).

## Part 2: Explain the Sources of Your Income

**4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?**

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.

If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

 No Yes. Fill in the details.

	Debtor 1	Debtor 2		
	Sources of income Check all that apply.	Gross Income (before deductions and exclusions)	Sources of income Check all that apply.	Gross Income (before deductions and exclusions)
<b>From January 1 of current year until the date you filed for bankruptcy:</b>  (January 1 to December 31, <u>2022</u> ) YYYY	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$6,498.00	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	
<b>For last calendar year:</b>  (January 1 to December 31, <u>2022</u> ) YYYY	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$33,174.00	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	
<b>For the calendar year before that:</b>  (January 1 to December 31, <u>2021</u> ) YYYY	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$30,988.00	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	

**5. Did you receive any other income during this year or the two previous calendar years?**Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. No Yes. Fill in the details.

	Debtor 1	Debtor 2		
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross Income from each source (before deductions and exclusions)
<b>From January 1 of current year until the date you filed for bankruptcy:</b>  (January 1 to December 31, <u>2022</u> ) YYYY				
<b>For last calendar year:</b>  (January 1 to December 31, <u>2022</u> ) YYYY				
<b>For the calendar year before that:</b>  (January 1 to December 31, <u>2021</u> ) YYYY	retirement cash out- previous employer  _____ _____ _____	\$5,164.00  _____ _____		

Debtor 1

Jennifer

Kristen

Willhite

First Name

Middle Name

Last Name

Case number (if known) \_\_\_\_\_

## Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

## 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?

No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$7,575\* or more?

No. Go to line 7.

Yes. List below each creditor to whom you paid a total of \$7,575\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

\* Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.

Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No. Go to line 7.

Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Dates of payment	Total amount paid	Amount you still owe	Was this payment for...
_____	_____	_____	<input type="checkbox"/> Mortgage
_____	_____	_____	<input type="checkbox"/> Car
_____	_____	_____	<input type="checkbox"/> Credit card
_____	_____	_____	<input type="checkbox"/> Loan repayment
_____	_____	_____	<input type="checkbox"/> Suppliers or vendors
_____	_____	_____	<input type="checkbox"/> Other _____
City _____	State _____	ZIP Code _____	

## 7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

No

Yes. List all payments to an insider.

Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Insider's Name _____	_____	_____	_____
Number Street _____	_____	_____	_____
City _____	State _____	ZIP Code _____	_____

Debtor 1 Jennifer Kristen Willhite Case number (if known) \_\_\_\_\_

First Name Middle Name Last Name

**8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?**  
Include payments on debts guaranteed or cosigned by an insider.

No

Yes. List all payments that benefited an insider.

Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
_____	_____	_____	_____
Insider's Name _____	_____	_____	_____
Number Street _____	_____	_____	_____
City _____ State _____ ZIP Code _____	_____	_____	_____

**Part 4: Identify Legal Actions, Repossessions, and Foreclosures**

**9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?**

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

No

Yes. Fill in the details.

	Nature of the case	Court or agency	Status of the case
Case title <u>JEFFERSON CAPITAL SYSTEMS LLC V. JENNIFER THRALL</u>	Civil relief less than \$10,000: INDEBTEDNESS	<u>District Court of Stephens County</u> Court Name <u>101 S 11th St 301</u> Number Street <u>Duncan, OK 73533</u> City State ZIP Code	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Case number <u>CS-2023-00075W</u>			
Case title <u>CAPITAL ONE BANK (USA) NA V. JENNIFER THRALL</u>	Civil relief less than \$10,000: INDEBTEDNESS	<u>District Court of Stephens County</u> Court Name <u>101 S 11th St 301</u> Number Street <u>Duncan, OK 73533</u> City State ZIP Code	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Case number <u>CS-2022-00255R</u>			

**10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?**

Check all that apply and fill in the details below.

No. Go to line 11.

Yes. Fill in the information below.

Debtor 1

Jennifer

First Name

Kristen

Middle Name

Willhite

Last Name

Case number (if known) \_\_\_\_\_

Creditor's Name \_\_\_\_\_

Number Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

**Describe the property****Date****Value of the property****Explain what happened**

Property was repossessed.  
 Property was foreclosed.  
 Property was garnished.  
 Property was attached, seized, or levied.

**11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?**

 No Yes. Fill in the details.**Describe the action the creditor took****Date action was taken**    **Amount taken**

Creditor's Name \_\_\_\_\_

Number Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Last 4 digits of account number: XXXX- \_\_\_\_\_

**12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?**

 No Yes**Part 5: List Certain Gifts and Contributions**

**13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?**

 No Yes. Fill in the details for each gift.

Debtor 1

Jennifer

Kristen

Willhite

First Name

Middle Name

Last Name

Case number (if known) \_\_\_\_\_

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift			
Number Street			
City State ZIP Code			
Person's relationship to you			

**14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?**

<input checked="" type="checkbox"/> No			
<input type="checkbox"/> Yes. Fill in the details for each gift or contribution.			
Gifts or contributions to charities that total more than \$600	Describe what you contributed	Date you contributed	Value
Charity's Name			
Number Street			
City State ZIP Code			

**Part 6: List Certain Losses****15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?**

<input checked="" type="checkbox"/> No			
<input type="checkbox"/> Yes. Fill in the details.			
Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss	Date of your loss	Value of property lost
	Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property</i> .		

Debtor 1

Jennifer

Kristen

Willhite

First Name

Middle Name

Last Name

Case number (if known) \_\_\_\_\_

## Part 7: List Certain Payments or Transfers

**16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?**

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

No

Yes. Fill in the details.

	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
<u>Luke Homen Law, PLLC</u> Person Who Was Paid	Attorney's Fee and Filing Fee		
<u>10313 Greenbriar Pkwy</u> Number Street			<u>\$2,000.00</u>
<u>Oklahoma City, OK 73159</u> City State ZIP Code			
Email or website address			
Person Who Made the Payment, if Not You			

**17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?**

Do not include any payment or transfer that you listed on line 16.

No

Yes. Fill in the details.

	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid			
Number Street			
City State ZIP Code			

**18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?**

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property).  
Do not include gifts and transfers that you have already listed on this statement.

No

Yes. Fill in the details.

Debtor 1

Jennifer

First Name

Kristen

Middle Name

Willhite

Last Name

Case number (if known) \_\_\_\_\_

Description and value of property transferred			Describe any property or payments received or debts paid in exchange	Date transfer was made
Person Who Received Transfer				
Number	Street			
City	State	ZIP Code		

Person's relationship to you \_\_\_\_\_

**19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)**

 No Yes. Fill in the details.

Description and value of the property transferred		Date transfer was made
Name of trust		

**Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units**

**20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?**

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

 No Yes. Fill in the details.

	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
Dave	XXXX- _____	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	7/2022	\$0.00
Name of Financial Institution				
1265 S Cochran Ave				
Number Street				
Los Angeles, CA 90019				
City	State	ZIP Code		

**21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?**

 No Yes. Fill in the details.

Debtor 1

Jennifer

Kristen

Willhite

First Name

Middle Name

Last Name

Case number (if known) \_\_\_\_\_

Who else had access to it?			Describe the contents	Do you still have it?
Name of Financial Institution			Name	<input type="checkbox"/> No <input type="checkbox"/> Yes
Number	Street	Number	Street	
		City	State	ZIP Code
City		State	ZIP Code	

## 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

 No Yes. Fill in the details.

Who else has or had access to it?			Describe the contents	Do you still have it?
Name of Storage Facility			Name	<input type="checkbox"/> No <input type="checkbox"/> Yes
Number	Street	Number	Street	
		City	State	ZIP Code
City		State	ZIP Code	

## Part 9: Identify Property You Hold or Control for Someone Else

## 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

 No Yes. Fill in the details.

Where is the property?			Describe the property	Value	
Owner's Name			Number	Street	
Number	Street				
		City	State	ZIP Code	
City		State	ZIP Code		

Debtor 1

Jennifer

Kristen

Willhite

First Name

Middle Name

Last Name

Case number (if known) \_\_\_\_\_

## Part 10: Give Details About Environmental Information

## For the purpose of Part 10, the following definitions apply:

- *Environmental law* means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- *Site* means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- *Hazardous material* means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

## 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

 No Yes. Fill in the details.

Governmental unit		Environmental law, if you know it	Date of notice
Name of site		Governmental unit	
Number	Street	Number	Street
		City	State ZIP Code
		City	State ZIP Code

## 25. Have you notified any governmental unit of any release of hazardous material?

 No Yes. Fill in the details.

Governmental unit		Environmental law, if you know it	Date of notice
Name of site		Governmental unit	
Number	Street	Number	Street
		City	State ZIP Code
		City	State ZIP Code

## 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

 No Yes. Fill in the details.

Debtor 1

Jennifer

Kristen

First Name

Middle Name

Willhite

Last Name

Case number (if known) \_\_\_\_\_

Case title \_\_\_\_\_

Court Name \_\_\_\_\_

 Pending On appeal Concluded

Number Street \_\_\_\_\_

Case number \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

**Part 11: Give Details About Your Business or Connections to Any Business****27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?**

A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time

A member of a limited liability company (LLC) or limited liability partnership (LLP)

A partner in a partnership

An officer, director, or managing executive of a corporation

An owner of at least 5% of the voting or equity securities of a corporation

 No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business.

Name _____	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
Number Street _____		EIN: _____
City _____ State _____ ZIP Code _____	Name of accountant or bookkeeper	Dates business existed
		From _____ To _____

**28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.** No Yes. Fill in the details below.

Date issued \_\_\_\_\_

Name \_\_\_\_\_ MM / DD / YYYY \_\_\_\_\_

Number Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Debtor 1

Jennifer  
First NameKristen  
Middle NameWillhite  
Last Name

Case number (if known) \_\_\_\_\_

## Part 12: Sign Below

I have read the answers on this **Statement of Financial Affairs** and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

 /s/ Jennifer Kristen Willhite

Signature of Jennifer Kristen Willhite, Debtor 1

Date 04/27/2023

Did you attach additional pages to your **Statement of Financial Affairs for Individuals Filing for Bankruptcy** (Official Form 107)?

No

Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person \_\_\_\_\_

Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Fill in this information to identify your case:

Debtor 1	<u>Jennifer</u>	<u>Kristen</u>	<u>Willhite</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u></u>	<u></u>	<u></u>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Western District of Oklahoma</u>		
Case number (if known)	<u></u>		

Check if this is an amended filing

## Official Form 108

### Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
---	---	---

Debtor 1

<b>Jennifer</b>	<b>Kristen</b>	<b>Willhite</b>
First Name	Middle Name	Last Name

Case number (if known) \_\_\_\_\_

## Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in **Schedule G: Executory Contracts and Unexpired Leases** (Official Form 106G), fill in the information below. Do not list real estate leases. **Unexpired leases** are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Part 3: Sign Below

**Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.**

X /s/ Jennifer Kristen Willhite  
Signature of Debtor 1

Date 04/27/2023  
MM/ DD/ YYYY

**United States Bankruptcy Court**  
Western District of Oklahoma

**In re** Willhite, Jennifer Kristen

Case No. \_\_\_\_\_

**Debtor** Chapter \_\_\_\_\_ 7

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR**

1. Pursuant to 11 U .S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept .....	\$1,682.00
Prior to the filing of this statement I have received .....	\$1,682.00
Balance Due .....	\$0.00

2. The source of the compensation paid to me was:

Debtor  Other (specify)

3. The source of compensation to be paid to me is:

Debtor  Other (specify)

4.  I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor' s financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. Debtor has also deposited with Luke Homen Law, PLLC, the costs involved in this matter. The costs included the court filing fee, credit counseling classes, and credit report. This amount was held in trust prior to filing and is not included in the above-stated amount.

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

B2030 (Form 2030) (12/15)

Representation does not include adversarial complaints, hearings, or discovery. If Debtor chooses to file a Redemption or Motion to Avoid Lien, there will be a separate fee.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

04/27/2023  
*Date*

/s/ Luke Homen

Luke Homen  
*Signature of Attorney*

Bar Number: 32243  
Luke Homen Law, PLLC  
10313 Greenbriar Pkwy  
Oklahoma City, OK 73159  
Phone: (405) 639-2099  
Fax: (405) 202-1654

Luke Homen Law, PLLC  
*Name of law firm*

Fill in this information to identify your case:

Debtor 1	Jennifer	Kristen	Willhite
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	Western District of Oklahoma		
Case number (if known)			

Check one box only as directed in this form and in Form 122A-1Supp:

1. There is no presumption of abuse.

2. The calculation to determine if a presumption of abuse applies will be made under *Chapter 7 Means Test Calculation* (Official Form 122A-2).

3. The Means Test does not apply now because of qualified military service but it could apply later.

Check if this is an amended filing

**Official Form 122A-1****Chapter 7 Statement of Your Current Monthly Income**

12/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file *Statement of Exemption from Presumption of Abuse Under § 707(b)(2)* (Official Form 122A-1Supp) with this form.

**Part 1: Calculate Your Current Monthly Income****1. What is your marital and filing status? Check one only.** **Not married.** Fill out Column A, lines 2-11. **Married and your spouse is filing with you.** Fill out both Columns A and B, lines 2-11. **Married and your spouse is NOT filing with you. You and your spouse are:** **Living in the same household and are not legally separated.** Fill out both Column A and B, lines 2-11. **Living separately or are legally separated.** Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B).

**Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case.** 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

	<i>Column A</i> <b>Debtor 1</b>	<i>Column B</i> <b>Debtor 2 or non-filing spouse</b>
<b>2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).</b>	\$2,766.45	\$2,789.86
<b>3. Alimony and maintenance payments.</b> Do not include payments from a spouse if Column B is filled in.	\$0.00	\$0.00
<b>4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support.</b> Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.	\$0.00	\$0.00
<b>5. Net income from operating a business, profession, or farm</b>	<b>Debtor 1</b>	<b>Debtor 2</b>
Gross receipts (before all deductions)	\$0.00	\$0.00
Ordinary and necessary operating expenses	- \$0.00	- \$0.00
Net monthly income from a business, profession, or farm	\$0.00	\$0.00
	<b>Copy here</b>	
	\$0.00	\$0.00
<b>6. Net income from rental and other real property</b>	<b>Debtor 1</b>	<b>Debtor 2</b>
Gross receipts (before all deductions)	\$0.00	\$0.00
Ordinary and necessary operating expenses	- \$0.00	- \$0.00
Net monthly income from rental or other real property	\$0.00	\$0.00
	<b>Copy here</b>	
	\$0.00	\$0.00
<b>7. Interest, dividends, and royalties</b>	\$0.00	\$0.00

**8. Unemployment compensation**

Do not enter the amount if you contend that the amount received was a benefit under

the Social Security Act. Instead, list it here: .....   
 For you..... \$0.00  
 For your spouse..... \$0.00

**9. Pension or retirement income.** Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.

**10. Income from all other sources not listed above.** Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.

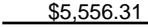
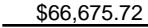
Column A Debtor 1	Column B Debtor 2 or non-filing spouse
\$0.00	\$0.00

\$0.00	\$0.00
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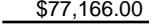
Total amounts from separate pages, if any.

\_\_\_\_\_ + \_\_\_\_\_ = \_\_\_\_\_  
 + \$2,766.45 + \$2,789.86 = \$5,556.31  
 Total current monthly income

**Part 2: Determine Whether the Means Test Applies to You****12. Calculate your current monthly income for the year.** Follow these steps:

12a. Copy your total current monthly income from line 11.....    
 Multiply by 12 (the number of months in a year).  
 12b. The result is your annual income for this part of the form.  

**13. Calculate the median family income that applies to you.** Follow these steps:

Fill in the state in which you live.   
 Fill in the number of people in your household.   
 Fill in the median family income for your state and size of household.....    
 To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

**14. How do the lines compare?**

14a.  Line 12b is less than or equal to line 13. On the top of page 1, check box 1, *There is no presumption of abuse.*  
 Go to Part 3. Do NOT fill out or file Official Form 122A-2.

14b.  Line 12b is more than line 13. On the top of page 1, check box 2, *The presumption of abuse is determined by Form 122A-2.*  
 Go to Part 3 and fill out Form 122A-2.

Debtor 1

Jennifer  
First NameKristen  
Middle NameWillhite  
Last Name

## Part 3: Sign Below

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

**X** /s/ Jennifer Kristen Willhite

Signature of Debtor 1

Date 04/27/2023  
MM/ DD/ YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

IN THE UNITED STATES BANKRUPTCY COURT  
WESTERN DISTRICT OF OKLAHOMA  
OKLAHOMA CITY DIVISION

IN RE: Willhite, Jennifer Kristen

CASE NO

CHAPTER 7

**VERIFICATION OF CREDITOR MATRIX**

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date 04/27/2023 Signature /s/ Jennifer Kristen Willhite  
Jennifer Kristen Willhite, Debtor

Ars Account Resolution  
Po Box 459079  
Fort Lauderdale, FL 33345-9079

Axcssfn/cngo  
7755 Montgomery Rd  
Cincinnati, OH 45236-4291

Capital One  
PO Box 30285  
Salt Lake City, UT 84130

CBSA Collection  
Po Box 1929  
Stillwater, OK 74076-1929

Check 'n Go  
2360 N Highway 81  
Duncan, OK 73533-1219

CHIME  
CHIME  
Po Box 417  
San Francisco, CA 94104-0417

Courtesy Loans  
810 W Main St  
Duncan, OK 73533-4616

Dept of Ed/aidvantage  
PO Box 4450  
Portland, OR 97208-4450

Duncan Anesthesia Associates  
1310 W Oak Ave  
Duncan, OK 73533

Duncan Regional Hospital  
PO Box 1264  
Duncan, OK 73534

HRRG  
PO Box 8486  
Coral Springs, FL 33075

I.c. System, Inc  
Po Box 64378  
Saint Paul, MN 55164

Jefferson Capital Syst  
16 Mcleland Rd  
Saint Cloud, MN 56303

Jefferson Capital Systems LLC  
16 McLeland Rd, St Cloud  
Saint Cloud, MN 56303

Love Beal & Nixon  
Po Box 32738  
Oklahoma City, OK 73123

Loyalloans  
810 W Main St  
Duncan, OK 73533-4616

Merrick Bank Corp  
PO Box 9201  
Old Bethpage, NY 11804-9001

Navient  
PO Box 9500  
Wilkes Barre, PA 18773

Rausch Sturm LLP  
250 N Sunnyslope Rd Ste 300  
Brookfield, WI 53005

U S Dept of Ed  
Po Box 5609  
Greenville, TX 75403-5609

Vermillion Plumbing  
306 W Main St  
Duncan, OK 73533-7028

Wakefield & Associates  
PO Box 58  
Fort Morgan, CO 80701

Brent Willhite  
318 N D St  
Duncan, OK 73533-6628